



Appeal Form 2011-2012

Due by April 20th, 2011

Student Name

Current Grade Level: **5 6 7 8 9 10 11**
(please circle)

Current Course in Subject Area _____

Current Teacher _____

Course I've Been Recommended For _____

Course I Am Appealing For _____

Total # AP Courses Desired _____
(where relevant)

Please use the back of this sheet, or attach a separate sheet, explaining why your appeal should be considered.

On my honor as a St. David's Student I hereby certify that the work I have provided in this appeal is entirely my own.

Student Signature

I understand that my student is in the process of appealing his/her _____
(department) placement for next year and I am in support of this endeavor.

Parent Signature

Appeal Outcome (For Department Use Only)

Granted

Postponed

Denied

Department Chair Signature

Division Principal Signature